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South Dakota Board of Nursing

South Dakota Department of Health
722 Main Street, Sulte 3; Spearfish, SD 57783
(605) 642-1388; Fax: (605)642-1389; www.state.sd.us/doh/nursing-

Nurse Aide Application for *Re-Approval* of Training Program

All Nurse Aide (NA) Training Programs in South Dakota must be approved by the South Dakota Board of Nursing pursuant to <a href="https://example.com/article-en/state

South Dekote Board of Nursing 722 Nain Street, Suite 3 Spearfish, SD 57783

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lect option(s) for Re-Approval: Request re-approval without changes to	omoram coomi	nator, primary instri	uctor, supplemen	ntal personnel or	
Request re-approval Without Changes to curriculum	program covers.		٠		
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Complete evaluation of the curriculum	im .	ium changes			
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Supplemental Personnel, attach curriculum vita, resume, or work history.



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Source Source Races.	LICENSURE/REGISTRATION				
Supplemental Personnel & Credentials	State	Number	Evalentian	Verification (Completed by SDBON)	1/9/12
Branda Fox RN Dehora Yeah ENN-Restorative As Linda Bantner CNT-Restorative As Amy Lynn Gorzalka CLE-SLP		4.00 KOS	11/26/2013 07/01/2013 06/01/2014 01/01/2013	South es S	19112

2. Complete Evaluation of the Curriculum: Indicate compliance relative to each standard during the previous two years. Explain any "no" responses on a separate sheet of paper. (Pursuant to ARSD 44:04:18 07, the Department of Health may conduct an unannounced on-site visit to determine compliance with requirements.)

Department of Realth Mey	Yes	No_
Standard	1	
Provided minimum 16 hours of instruction prior to state the	1	
Provided minimum 16 hours of supervised practical instruction; instructor ratio did not exceed 8		
Provided minimum 16 hours of supervised practical historically made	1	
students for one Instructor.	<u> </u>	
Provided instruction on each content area (see ARSD 44:04:18:15):		
Basic nursing skills	V	L
Personal care skills	~	
Mental health and social services	T / _ :	
Care of cognitively impaired clients	17.	i
Basic restorative nursing services	1000	
 Residents' rights Students did not perform any patient services until after the primary instructor found the student 	بما	17
to be competent	1	1
Students only provided patient services under the supervision of a more evaluation Students only provided patient services under the supervision of a more evaluation.	-	
Your agency maintains a 73-76 pass rate of scalar agency maintains agency mai		ــــــــــــــــــــــــــــــــــــــ

Submit Documentation to Support Requested Curriculum Changes: 3. Name of Course (If applicable): A variety of teaching methods may be utilized in achieving the classroom instruction such as independent study, video ☐ Submit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc). . . Submit documentation that supports requirements listed in ARSD 44:04:18:15, including: Behaviorally stated objectives with measurable performance criteria for each unit of curriculum Curriculum, objectives and agenda documenting the requirements for the minimum 75 hour course as follows: A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include: Communication and interpersonal skills, infection control, safety/emergency procedures, promoting residents' independence, respecting residents' rights. A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective care; the instructor ratio may not exceed eight students for one instructor. Instruction in each of the following content areas (see ARSD 44:04:18:15 for more detail): Basic nursing skills (including documentation) including: vital signs; height and weight; client environment needs; recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor; and caring for dying clients; Personal care skills, including: bathling; grooming, including mouth care; dressing; tolleting; assisting with eating and hydration; feeding techniques; skin care; and transfers, positioning, and turning;



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	(605) 642-1388; Fax: (605)642-1389; www.state.so.us/don/nuising	
GREAT FREEZ	DES GRADI PUNCES.	
ם	Mental health and social services, including: responding appropriately to behaviors; awareness of developmental tasks associated with aging process; respecting personal choices and preserving client dignity, and recognizing sources of emotional support;	
	Care of cognitively impaired clients, including: communication and techniques for addressing unique	
٥	eating, and dressing; range of motion; turning and positioning in bed and chair; bowel and blauber c	
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Program Coo	pordinator Signature: Les Gen Bold Date: 4/5/2010	practice (* 1.)
This section	to be completed by the South Dakota Board of Nursing	
D-L- A-oVest	atton Received: 4/5/12/ Date Application Denied:	
Date Approve	ved: 4/13/12 Reason for Dental:	
Board Repres		
Date Modice :	Source on Management To 12 12	